IAP20 Rec'd FCT/FTO 10 MAR 2006

Application Data Sheet

Application Information

Application Type:: National Stage

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of Copies of CDs::

Sequence Submission?:: None

Computer Readable Form (CRF):: No

Number of copies of CRF:: 0

Title:: METHOD AND DEVICE FOR DETECTING

DEFECTS OF ELECTROMAGNETIC

PROTECTION FOR ELECTRIC

HARNESSES

Attorney Docket Number::

Request for Early No

Publication?::

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 1

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Gov't Agency::

Contract or Grant Numbers::

Secrecy Order in Parent No

Appl.?::

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: SERGE

Middle Name::

Family Name:: VALLET

Name Suffix::

City of Residence:: CAVAILLON

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing 1358 AVENUE DE SAINT BALDOU

Address::

City of Mailing Address:: CAVAILLON

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 84300

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: MICHEL

Middle Name::

Family Name:: THOLOMIER

Name Suffix::

City of Residence:: FUVEAU

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing 278B CHEMIN SAINT FRANCOIS

Address::

City of Mailing Address:: FUVEAU

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 13710

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: JEAN-PIERRE

Middle Name::

Family Name:: DERAIN

Name Suffix::

City of Residence:: MALLEMORT

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing MAS DE LA TOUR, CHEMIN DE LA TOUR

Address::

City of Mailing Address:: MALLEMORT

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 13370

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: JEAN

Middle Name::

Family Name:: DUVEAU

Name Suffix::

City of Residence:: CARNOUX

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing 4 ALLEE DE LA BOUSCARLOU

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Address::							
City of Mailing Address::			CARNOUX				
State or Provinc	e of Mailin	g Addre	ess::				
Country of Mailing Address::			FRANCE				
Postal or Zip Co	de of Maili	ng Addı	ress::	13470			
Correspondence I	nformation						
Correspondence Customer			00466				
Number::							
Representative I	nformation						
Representative Customer			00466				
Number::							
		. 1					
Domestic Priorit	y Informati	on					
Application::	Continuity	ontinuity		Parent		Parent Filing	
	Type::		Applic	ation::		Date::	
This application	National S	tage of	PCT/FR	2004/0022	62	9/7/04	
				* who:			
			•	···			
Foreign Priority	Information	n					
Country::	Application		Filing Date:: Pr		Pri	riority	
	Number::				Cla	imed::	

9/11/03

FRANCE

0310683

Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::